



WORKPLACE SAFETY AND HEALTH IN THE DISTRICT OF COLUMBIA

*From The
National Institute for Occupational Safety and Health*



State Profile 2002

*Delivering on the Nation's promise:
Safety and health at work for all people through prevention.*

The National Institute for Occupational Safety and Health

NIOSH is the primary federal agency responsible for conducting research and making recommendations for the prevention of work-related illness and injury. NIOSH is located in the Department of Health and Human Services in the Centers for Disease Control and Prevention. The NIOSH mission is to provide national and world leadership to prevent work-related illness, injury, disability, and death by gathering information, conducting scientific research, and translating the knowledge gained into products and services. As part of its mission, NIOSH supports programs in every state to improve the health and safety of workers. NIOSH has developed this document to highlight recent NIOSH programs important to workers and employers in the District of Columbia.

The Burden of Occupational Illness and Injury in the District of Columbia

- In the District of Columbia, there are approximately 263,000 individuals employed in the workforce.¹
- In 2000, 13 workers died as a result of workplace injuries.²
- In 1999, the most recent year for which data are available, the rate of fatal workplace injuries was 5.3 deaths per 100,000 workers—above the national average rate of 4.5 deaths per 100,000 workers.²

The Cost of Occupational Injury and Illness in the District of Columbia

In 2000, the most recent year for which data are available, a total of \$77.7 million was paid for workers' compensation claims by the District of Columbia private insurers and self-insured employers.³ This figure does not include compensation paid to workers employed by the federal government and also underestimates the total financial burden for private sector businesses, since only a fraction of health care costs and earnings lost through work injuries and illnesses is covered by workers' compensation. Chronic occupational illnesses like cancer are substantially under-reported in workers' compensation systems because work-relatedness is often difficult to establish.

How NIOSH Prevents Worker Injuries and Diseases in the District of Columbia

Health Hazard Evaluations (HHEs) and Technical Assistance

NIOSH evaluates workplace hazards and recommends solutions when requested by employers, workers, or state or federal agencies. Since 1993, NIOSH has responded to 95 requests for HHEs in the District of Columbia in a variety of industrial settings, including the following example:

District of Columbia: Protecting Workers from Anthrax Infection

In October 2001, anthrax attacks through the mail presented a new and deadly health threat to postal workers,

government employees, and news media offices. NIOSH quickly responded by sending scientists to locations where workers were at risk. Part of this effort was NIOSH's response to three anthrax-related HHEs in the District of Columbia. NIOSH developed sampling procedures, recommended effective interim protective measures, safeguarded workers who decontaminated affected workplaces, assessed the effectiveness of decontamination, and disseminated related information widely. When workers raised concerns about handling irradiated mail, NIOSH helped answer their questions, partially by responding to three related HHEs in the District of Columbia. At the request of the U.S. Office of Personnel Management, NIOSH evaluated employees' concerns about symptoms such as nose bleeds, eye irritation, skin rashes, and upper and lower respiratory irritation. NIOSH also responded to a request by the U.S. Postal Service for an HHE to address worker concerns about possible exposure to carbon monoxide from large bags of irradiated mail. In addition, with the help of an interagency technical team, NIOSH conducted an HHE to address worker concerns about irradiated mail in the U.S. Capitol, Senate, and House offices. NIOSH's contributions were integral to the national effort to protect workers from the deadly threat of anthrax-contaminated mail. The lessons learned will strengthen future preparedness.

Fire Fighter Fatality Investigation and Prevention Program

The purpose of the NIOSH Fire Fighter Fatality Investigation and Prevention Program is to determine factors that cause or contribute to fire fighter deaths suffered in the line of duty. NIOSH uses data from these investigations to generate fatality investigation reports and a database of case results that guides the development of prevention and intervention activities. Since 1997, there have been two fire fighter fatality investigations in the District of Columbia, including the following example:

District of Columbia: Two Fire Fighters Die and Two Are Injured in Townhouse Fire

On May 30, 1999, several fire fighting crews responded to an alarm involving a townhouse fire. Due to poor coordination and communication among the crews, two fire fighters died and two were injured. NIOSH investigators concluded that, to minimize the risk of similar incidents, among other recommendations, fire departments should: ensure that standard operating procedures are always followed; make certain that fire fighters from different crews coordinate their efforts; ensure that when a piece of equipment is taken out of service, appropriate back up equipment is readily available; ensure that all responding crews are aware of any follow-up reports from dispatch; ensure that a rapid intervention team is established and in position immediately upon arrival; consider providing all fire fighters with a Personal Alert Safety System (PASS) integrated into their Self-Contained Breathing Apparatus (SCBA); and develop and implement a preventive maintenance program to ensure that all SCBAs are adequately maintained.

Building State Capacity

The NIOSH Washington Office, where the Office of the Institute's Director is based, responds to inquiries regarding NIOSH programs, handles briefings on occupational safety and health issues, and provides fast access to occupational safety and health experts. There are currently 25 employees in the NIOSH Washington, District of Columbia, Office.

Extramural Programs Funded by NIOSH

The following are examples of recent research contracts, research grants, training grants, or cooperative agreements funded by NIOSH in the District of Columbia.

Safety and Health Interventions in the Construction Industry

Over the past ten years the Center to Protect Workers' Rights (CPWR) has planned, developed, and operated a national center dedicated to improving safety and health performance in the construction industry. With support from NIOSH, CPWR aims to: implement interventions with proven effectiveness in industry-wide

settings; identify needs and develop new interventions; support the development, dissemination, and adoption of best practices to the industry; and coordinate private and public sector activities in construction.

Hazardous Substance Training for Emergency Responders

NIOSH funds the International Association of Fire Fighters (IAFF) to implement a national hazardous material training program for emergency responders. The program aims to: offer direct training to emergency responders using current IAFF networks in the emergency response community; expand current efforts to include other emergency responders such as police and emergency medical services personnel; conduct an assessment to determine the training needs of first responders; explore new technologies for training delivery; and update and distribute existing first responder operations materials to requesting fire departments.

Graduate Training Programs in Occupational Health Psychology

Changing workforce demographics, technologies, economic and productivity factors, and the changing nature of work produce new and increasingly urgent health concerns for stress-induced mental and physical health problems. NIOSH is funding the American Psychological Association to develop and implement a plan to establish specialized graduate-level curricula at multiple universities in the area of work organization, stress, and health. The new graduate programs will better prepare researchers and practitioners to investigate and prevent organizational risk factors for occupational illness and injury.

Social and Economic Impact of Occupational Injury and Illness

With support from NIOSH, researchers at MedStar Research Institute will assess disability, early retirement, and job change caused by occupational injury and illness among roofers. Workers will be interviewed as they leave their trade and one year later to determine their reason for leaving, the nature of and functional limitations related to their injury or illness, and the social and economic consequences of the decision to leave.

Additional information regarding NIOSH services and activities can be accessed through the NIOSH home page at <http://www.cdc.gov/niosh/homepage.html> or by calling the NIOSH 800-number at 1-800-356-NIOSH (1-800-356-4674)

¹U.S. Department of Labor (DOL), Bureau of Labor Statistics (BLS), Local Area Unemployment Statistics, Current Population Survey, 2000.

²DOL, BLS in cooperation with state and federal agencies, Census of Fatal Occupational Injuries, 1999-2000.

³National Academy of Social Insurance, *Workers' Compensation: Benefits, Coverage, and Costs, 2000 New Estimates*, May 2002.